



Atty. Dkt. No. 029318-0973

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: H. William Bosch et al.  
Title: NOVEL NIMESULIDE COMPOSITIONS  
Appl. No.: 10/697,703  
Appl. Filing Date: 10/31/2003  
Examiner: Tristan J. MAHYERA  
Art Unit: 1615  
Confirmation Number: 8369

**REQUEST FOR CONTINUED EXAMINATION (RCE)**  
**TRANSMITTAL**

Mail Stop RCE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application. This RCE and the enclosed items listed below are being filed prior to the earliest of: (1) payment of the issue fee (unless a petition under 37 C.F.R. § 1.313 is granted); (2) abandonment of the application; or (3) the filing of a notice of appeal to the U.S. Court of Appeals for the Federal Circuit under 35 U.S.C. §141, or the commencement of a civil action under 35 U.S.C. §145 or §146 (unless the appeal or civil action is terminated).

1. Submission required under 37 C.F.R. §1.114: (check items that apply)

a. Previously submitted:

[ X ] Please enter and consider the amendment and/or reply previously filed on  
July 1, 2008.

08/28/2008 AWONDAF1 00000093 10697703

01 FC:1801  
02 FC:1252

810.00 OP  
460.00 OP

b. Enclosed are:

☒ Declaration Under 37 CFR 1.131 (H. William Bosch).

☒ Information Disclosure Statement.

☒ Form PTO/SB/08 with copies of 18 listed reference(s).

The filing fee is calculated below:

|  | Claims as<br>Amended | Previously<br>Paid For | Extra Claims<br>Present | Rate       | Fee Totals |
|--|----------------------|------------------------|-------------------------|------------|------------|
| RCE Fee 1.17(e):                                     |                      |                        |                         | \$810.00   | = \$810.00 |
| Total Claims:  | 101                  | - 101                  | = 0                     | x \$50.00  | = \$0.00   |
| Independents   | 3                    | - 3                    | = 0                     | x \$210.00 | = \$0.00   |
| First presentation of any Multiple Dependent Claims: |                      |                        |                         | + \$370.00 | = \$0.00   |
| CLAIMS FEE TOTAL:                                    |                      |                        |                         |            | = \$810.00 |

☒ Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

|                                     |   |            |   |           |
|-------------------------------------|---|------------|---|-----------|
| <input type="checkbox"/>            | Extension for response filed within the first month:      | \$120.00   | 0 | \$0.00    |
| <input checked="" type="checkbox"/> | Extension for response filed within the second month:     | \$460.00   |   | \$460.00  |
| <input type="checkbox"/>            | Extension for response filed within the third month:      | \$1,050.00 |   | \$0.00    |
| <input type="checkbox"/>            | Extension for response filed within the fourth month:     | \$1,640.00 |   | \$0.00    |
| <input type="checkbox"/>            | Extension for response filed within the fifth month:      | \$2,230.00 |   | \$0.00    |
| EXTENSION FEE SUBTOTAL:             |   |            |   | \$460.00  |
| EXTENSION FEE ALREADY PAID: -       |   |            |   | \$0.00    |
| EXTENSION FEE TOTAL                 |   |            |   | \$460.00  |
| CLAIMS AND EXTENSION FEE TOTAL:     |   |            |   | \$1270.00 |
| <input type="checkbox"/>            | Small Entity Fees Apply (subtract ½ of above):            |            |   | \$0.00    |
| <input type="checkbox"/>            | Suspension of action requested under 37 C.F.R. § 1.103(c) |            |   | \$0.00    |
| TOTAL FEE:                          |   |            |   | \$1270.00 |

A credit card payment form in the amount of \$1270.00 to cover the filing fee is enclosed.

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by the credit card payment form being unsigned, providing incorrect information resulting in a rejected credit card transaction, or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

By Michele M. Simkin

Date: August 27, 2008

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